PTO/SB/06 (08-03)
Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) NUMBER FILED NUMBER EXTRA FOR RATE RATE FEE FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS minus 20 = (37 CFR 1.16(c)) X S OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = X \$ OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR TOTAL * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) SMALL ENTITY (Column 1) SMALL ENTITY CLAIMS HIGHEST PRESENT REMAINING RATE NUMBER ADDI-RATE ADDI-ENT **PREVIOUSLY EXTRA** AFTER TIONAL TIONAL AMENDME PAID FOR FFF FEE Total (37 CFR 1.16(c)) ENDM Minus x s OR Minus X S OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-**AFTER PREVIOUSLY EXTRA** TIONAL **AMENDMENT TIONAL AMENDMENT** PAID FOR FEE FEE Total Minus (37 CFR 1.16(c)) OR Independent (37 CFR 1.16(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-**AMENDMENT EXTRA** AFTER PREVIOUSLY TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus OR X \$ Independent (37 CFR 1.16(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + • TOTAL TOTAL OR ADD'L FEE ADD'L FEE * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATI N FEE DETERMINATI N RECORD Effective Oct ber 1, 2000 **CLAIMS AS FILED - PART I** SMALL ENTITY OTHER THAN (Column 1) (Column 2) SMALL ENTITY TYPE OR **TOTAL CLAIMS** L2 RATE FEE RATE FEE BASIC FEE 355.00 FOR NUMBER FILED NUMBER EXTRA BASIC FEE 710.00 OR 42 TOTAL CHARGEABLE CLAIMS 396 minus 20= X\$ 9= X\$18-OR INDEPENDENT CLAIMS minus 3 = 80 X40= X80= OR MULTIPLE DEPENDENT CLAIM PRESENT +270= +135= OR * If the difference in column 1 is less than zero, enter "0" in column 2 118 6 TOTAL TOTAL OB OTHER THAN CLAIMS AS AMENDED - PART II **SMALL ENTITY** SMALL ENTITY OR (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-**IENT A** REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL AFTER PREVIOUSLY **EXTRA** FEE FEE AMENDMENT PAID FOR AMENDM Total Minus XS 9-X\$18 OR Minus Independent X40= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135= OR TOTAL OR ADDIT, FEE 19/05 ADDIT, FEE (Column 1) (Column 2) (Column 3) CLAIMS HICHES ADDI-ADDI-NUMBER REMAINING PRESENT RATE TIONAL RATE TIONAL AFTER **PREVIOUSLY** EXTRA AMENDMENT MENDMENT **PAID FOR** FEE FEE Minus Total X\$ 9= X\$1 OR Independent Minus *** X40= X80-OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135 =OR OR ADDIT, FEE ADDIT, FEE (Column 2) (Column 3) (Column 1) CLAIMS 16.139 ADDI-ADDI-NUMBER REMAINING **PRESENT** TIONAL EN TIONAL RATE PREVIOUSLY RATE AFTER **EXTRA** AMENDMENT PAID FOR FEE FEE AMENDM Minus Total X\$18= X\$ 9= OR Minus Independent ... X40= X80= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= +270= OR " If the entry in column 1 is less than the entry in column 2, write "O" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR ADDIT. FEE ADDIT, FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Application or Docket Number